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IPE Grand Rounds Learning Activity

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I attended the IPE Grand Rounds hosted by Jefferson Students for Interprofessional Education (JSIPE) with the Palliative Care Team. There were several different health care professionals present on the panel that explained their specific and individualized roles within the Palliative Care team, as well how these roles united to help them function best as a group. The panel demonstrated these specific roles with a case presentation that also helped illustrate some of the conflicts they face on a daily basis, and how they overcome these conflicts to best serve their patients.

Before this panel discussion, I had little idea of what the role of the Palliative Care specialty entailed. This grand rounds session allowed me to learn not only the role of the physician, but also how nursing, social work, and pastoral care all play specific, critical roles. The social worker talked about the importance of educating patients on the importance of an advanced directive, the nurse practitioner about identifying and evaluating a potential plan, the physician about pain management and unifying fractioned care, and the pastoral care resident about identifying spiritual comforts for the patient and family. While all of the panel members were confident in their specific roles, they also all stressed the importance of team collaboration, communication, and compromise. The integrated care in this field is essential, as most often there is no black and white answer, but a large grey area where the course that is best for the patient and patient's family must be delicately identified. Interacting with patients and families while they are often struggling to accept the idea of end of life care seems like an impossibly hard task, both logistically and emotionally. The Palliative Care panel helped me better understand how to navigate these situations, expressing the importance of patience, empathy, and compassion.

When the Palliative Care team expressed to the audience what their role as a specialty was in the hospital, they stressed communication. Later in the discussion they admitted that they are often needed in cases because patients and patients' families have received a barrage of information from a variety of different specialties. This information overload can make it extremely difficult for patients to make decisions about their care or the care of their loved ones. Palliative Care's role is often to integrate this information and help unify fractioned care in the hospital. What the team posited to all of us, as future health care providers, was to try to minimize this fractioned care within each of our specialties, regardless of what we choose to practice, and integrate aspects of Palliative Care across the health care profession. I hope that as a future health care professional, I will continually strive to make sure my patients are receiving informed, integrated, and compassionate care.